PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains valid OMB control number

DECLAR	ATION F	OR UTILITY OR	Attorney Docket No.	647P004				
DESIGN			First Named Inventor	Bruce A. Bishop				
PAT	ENT API	PLICATION	COMPLETE IF KNOWN					
Declaration		□ Declaration	Application Number	10/685,057				
Submitted	OR	Submitted after Initial	Filing Date	October 14, 2003				
with Initial		Filing (surcharge	Group Art Unit					
Filing		(37 CFR 1.16(e)) Required)	Examiner Name					
		(Title of the	Invention)	· · · · · · · · · · · · · · · · · · ·				
the specification of what is attached heret								
OR .			,					
was filed on (MIV	I/DD/YYYY)	October 14, 2003	as United States Application	n Number or PCT International				
Application Number	10/685,0	o57 and was amen	ded on (MM/DD/YYYY)	(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
in-part applications, n	naterial inform	information which is material to pa ation which became available bet continuation-in-part application.		R 1.56, including for continuation- rapplication and the national or				
or plant breeder's rights than the United States	certificate(s), of America, list	under 35 U.S.C. 119(a)-(d) or (f), or 365(a) of any PCT international aped below and have also identified be hts certificate(s), or any PCT interna	plication which designated at lea low, by checking the box, any for	st one country other eign application for				

Prior Foreign Application
Number(s)
Country
Foreign Filing Date
(MM/DD/YYYY)
Not Claimed
YES
NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

Application Number(s)

Filing Date (MM/DD/YYYY)

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 3] 4

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains valid OMB control number.

# **DECLARATION** – Utility or Design Patent Application

Direct all correspond	dence	to:								
Customer Number									<del></del>	
Name	Kevii	S. Lemack								
	Nield	s & Lemack								
Address	176 E	176 E. Main Street – Suite 7								
City	West	boro		State	1	MA			Zip Code	01581
Country	US		Tele	phone		508-89	8-1818		Fax	508-898-2020
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR	FIRST	INVENTOR	:	□ A i	petiti	on has	been filed	l for this u	nsigned in	ventor
Given Name	_				Fam	ily Nar	ne			
(first and middle [if any	ß Br	uce A.			or S	urname	Bis	shop		
Inventor's Signature  Date Dec. 1, 2003						Date Dec. 1, 2003				
Residence: City Arli	ington		State	e	ANA Countr			Country	US	Citizenship US
Mailing Address 4	8 Kilsy	the Road								
City Arlington		State MA				Zip	02174	4	Count	try US
NAME OF SECOND	INVEN	TOR:		□ A:	petiti	on has	been filed	for this u	nsigned in	ventor
Given Name (first and middle [if any]	) Pet	er J.				ily Nar urname		ward		
Inventor's Signature				•						Date
Residence: City Pinawa State MB				e MB				Country	CA	Citizenship CA
Mailing Address 3 Monck Place ,										
City Pinawa		State ME			·	Zip	ROE 11		Count	
Additional inventors a	re heina	named on the	10 SII	nnlemen	tal Ad	ditional I	nventor(s) s	heet(s) PTO	/SB/02A attai	ched hereto

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains valid OMB control number.

## **DECLARATION – Utility or Design Patent Application**

Direct all correspond	dence	to:											
Customer Number								· · · · · · · · · · · · · · · · · · ·	•			· · · · · · ·	
Name	Kevii	n S. Lemack						-		···	<del> </del>		
	Nield	Nields & Lemack											
Address	176 E	E. Main Stree	et – S	uite 7									
City .	West	boro		State	MA					Zip Code		81	
Country	US		Tele	ерһопе		508-89	98-1818		Fax	Fax		-898-202	20
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
NAME OF SOLE OR	FIRST	INVENTOR	:	□ A	petit	tion ha	s been file	d for this	unsig	ned in	ventor		
Given Name	·				Far	nily Na	ıme						
(first and middle [if any]	) Br	uce A.			or S	Surnam	e Bi	shop			r		
Inventor's Signature Date													
									-				
Residence: City Arli	ington		Stat	te	V.	VA Country US				Citizens	hip U	IS	
Mailing Address 4	8 Kilsy	the Road											
City Arlington		State MA		Y		Zip	0217	· · · · · · · · · · · · · · · · · · ·		Count		3	
NAME OF SECOND	INVEN	TOR:			petit	ion ha	s been filed	d for this	unsig	gned inv	ventor		
Given Name (first and middle [if any]	) Pet	ter J.				nily Na Surnam		yward		-			
<u> </u>	·	1.0		0	01 0	Juinani	114	y waitu			22 De	center	
Signature Velo	VALUE THERE IS A												
Residence: City Pinawa State MB Country CA Citizenship CA													
Mailing Address 3 Monck Place													
		_			•								
City Pinawa		State ME				Zip	ROE 1			Count	<u> </u>	ada	
Additional inventors are being named on the													

PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEB 1 7 2004 has a plus sign (+) inside this box Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains valid OMB control number.

### **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 46\_ of 34

Name of Additional Inventor, if any:				A petition has been filed for this unsigned inventor					
Given Name (first and	Given Name (first and middle [if any])				Family Name or Surname				
Robert L.			Gol	dsmith					
Inventor's Signature Land Spellin								Date Dec 1, 2003	
Residence: City Wayland State MA						Country U	IS,	Citizenship US	
Mailing Address 235 Concord Road									
City Wayland	State MA		.,	ZIP	01778		Count	try US	
Name of Additional Invent	Name of Additional Inventor, if any:							ventor	
Given Name (first and	middle [if any])		Family Name or Surname						
Garry G. A.			Haacke						
Inventor's Signature	do		<del>*************************************</del>					Dec. 01/2003	
Residence: City Belm	ont Sta	ite M	A Country US			S	Citizenship CA		
Mailing Address 58 Da	rtmouth Street, A	pt. 3	•						
City Belmont	State MA			ZIP	02478		Count	try US	
Name of Additional Invent	or, if any:	_ A	petiti	on has	been filed	for this unsig	gned in	ventor	
Given Name (first and	middle [if any])		Family Name or Surname						
						· ·			
Inventor's Signature								Date	
Residence: City State						Country		Citizenship	
Mailing Address	1 312				<u></u>	Country		Citizonanip	
	<del></del>								
City P	State			ZIP			Coun	try	

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are requi

### **POWER OF ATTORNEY CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of infor	mation unless it displays a valid OMB control number.
Application Number	10/685,057
Filing Date	October 14, 2003
First Named Inventor	Bruce A. Bishop
Title	Membrane Devices Using
Art Unit	
Examiner Name	
Attorney Docket Number	647P004

I hereby appoint:						
Practitioners associated to	with the Customer Number:					
OR						
X Practitioner(s) named bel	ow:					
	Name		Registration	Number		
Kevin S. Le	mack	32	2,579			
Henry C. Ni		17	7,029			
Robert Fram		54	4.104			
				· · · · · · · · · · · · · · · · · · ·	الحا	
as my/our attorney(s) or agent(s) Trademark Office connected the	) to prosecute the application identified abore rewith.	ve, and to tran	sact all business	s in the United States Pat	ent and	
Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:  OR  The address associated with Customer Number:						
OR	<u> </u>					
Firm or Individual Name						
Address	Nields & Lemack					
Address	176 E. Main Street - S	Suite 7				
City	Westboro	State	MA	Zip 01581		
Country	U.S.A.		500.00	0.000		
Telephone	508-898-1818	Fax	508-898	8-2020		
I am the:  X Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Name Bruc∉ A. B	ishop //	P	eter J. H	ayward		
Signature Dura A	Dorfu ?					
Date Date	1 1003		Telephone			
NOTE: Signatures of all the inventor forms if more than one signature is r	s or assignees of record of the entire interest or the equired, see below.	eir representativ	e(s) are required. S	Submit multiple		
∀ *Total of <u>3</u>	forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEB 1 7 2004

PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

e Paperwork Reduction Act of 1995, no persons are requi

### POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

red to respond to a collection of into	mation unless it displays a valid OlMB control number.
Application Number	10/685,057
Filing Date	October 14, 2003
First Named Inventor	Bruce A. Bishon
Title	Membrane Devices Using
Art Unit	
Examiner Name	
Attorney Docket Number	647P004

I hereby appoint:					<del></del>		
		W. W. Oustand Musham					
	SSOCIATEO	with the Customer Number:					
OR		<del></del>					
X Practitioner(s)	named be	low:					
		Name		Registration	on Number		
Kevin	S. Le	mack		32.579			
f 1	C. Ni		Τ	17,029			
	t Fran			54.104			
as my/our attorney(s Trademark Office co	or agent(	s) to prosecute the application identified erewith.	d above, and to tra	nsact all busine	ss in the United States Patent and		
lm *	Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:						
OR		<del></del>					
The addres	s associat	ed with Customer Number.					
OR		<del></del>					
X Firm or Individua	I Name						
Address		Nields & Lemack					
Address		176 E. Main Street					
City		Westboro	State	MA	Zip   01581		
Country		U.S.A.	<del></del>	500.0	22 2020		
Telephone		508-898-1818	Fax	508-8	98-2020		
X Applicant/In	I am the:  X Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
	SIGNATURE of Applicant or Assignee of Record						
	е А. Е	ishop	]	Peter J	Hayward (		
Signature	5-			- Ku	Haynard		
Date Z2D	ec lo	203		Telephone			
NOTE: Signatures of all forms if more than one s		s or assignees of record of the entire interes required, see below.	it or their representat	ive(s) are required	L Submit multiple		
N *Total of 3	·	forms are submitted.					

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEB 1 7 2004

PTO/SB/81 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

fer the Paperwork Reduction Act of 1995, no persons are requi

### **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS** INDICATION FORM

ed to respond to a collection of inform	nation unless it displays a valid OMB control number.
Application Number	10/685,057
Filing Date	October 14, 2003
First Named Inventor	Bruce A. Bishop
Title	Membrane Devices Using.
Art Unit	*
Examiner Name	
Attorney Docket Number	647P004

I hemby appoint:		· · · · · · · · · · · · · · · · · · ·					
Practitioners associated with the Customer Number:							
OR							
X Practitioner(s) named be	low:						
	Name		Registration	n Number			
Kevin S. Le	mack	3	32,579				
Henry C. Ni		1	17,029				
Robert Fram			54.104				
as my/our attorney(s) or agent(s) Trademark Office connected the	s) to prosecute the application identified abore even the control of the control	ove, and to tra	nsact all busine	ss in the United States Patent and			
Please recognize or change the	correspondence address for the above-ide	entified applica	ation to:				
The address associate	ed with the above-mentioned Customer Nur	mber:					
OR	<del></del>		<del></del>				
The address associate	ed with Customer Number:						
OR							
Firm or Individual Name							
Address	Nields & Lemack						
Address	176 E. Main Street -	Suite 7					
City	Westboro	State	MA	Zip   01581			
Country	U.S.A.						
Telephone	508-898-1818	Fax	508-89	98-2020			
l am the:				`			
Applicant/Inventor.							
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name Robert L	Name Robert L. Goldsmith': Gatry G. Maacke						
Signature Library	Speldul		Mu	in thurse			
Date Dic i							
NOTE: Signatures of all the inventor forms if more than one signature is r	s or assignees of record of the entire interest or trequired, see below*.	heir representat	ive(s) are required	. Submit multiple			
*Total of forms are submitted.							

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.